



Chris Nelson, Chair
Kristie Fiegen, Vice Chair
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South Dakota

PUBLIC UTILITIES COMMISSION

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January 18, 2013

The Honorable Ritchy Griep
Mayor, City of Humboldt
404 S. Madison
Humboldt, SD 57035

RE: South Dakota 2013 OQ Plan Inspection of Humboldt Natural Gas Facilities

Dear Mayor Griep:

This letter and attachments summarize the findings of the pipeline safety records inspection conducted in reference to the Humboldt natural gas facilities. I would like to thank Kristie Ellis and Terry Hanson with GTS for meeting with Mary Zanter and providing the required information.

I am pleased to report that there were no enforceable issues found during the inspection. No response to this report is required since there are no enforceable issues.

Please note the inspection conducted is limited to the specified code sections in the attached inspection forms. The South Dakota Public Utilities Commission (SDPUC) did not examine overall system condition or operability and does not warrant the same under any condition. Other system or code compliance issues may exist. Failure to include such items in this report does not prohibit future SDPUC action nor limit applicability in future inspections.

Please do not hesitate to contact me with any questions or concerns regarding this inspection.

Sincerely,

Nathan D. Solem

Nathan Solem
Pipeline Safety Program Manager
South Dakota Public Utilities Commission

Cc: Ms. Kristie Ellis, Finance Officer, City of Humboldt, finance@humboldtsd.com
Mary Zanter, SDPUC, mary.zanter@state.sd.us

Attachments

2013 South Dakota Pipeline Safety Inspection
Summary of Deficiencies
Operator: Humboldt Municipal Gas
Inspection Types: OQ Plan Inspection
Inspection Dates: January 4, 2013

Notices of Probable Violation

Code Section	Code Description	Deficiency Noted	Proposed Correction Due Date	Penalty Proposed	Maximum Allowable Penalty	Compliance Order Proposed
		None				

Warnings

Code Section	Code Description	Deficiency Noted	Warning	Proposed Correction Due Date
		None		

Notices of Concern

Code Section	Code Description	Comment
		Prior to inspection, please make sure that all printed documents being presented are the most recent revisions of the documents.

OPERATOR INSPECTION-SPECIFIC INFORMATION

Inspection Date(s): 1/4/13 through	
Name of Operator: Humboldt Municipal Gas	
OPS Operator ID: 30964	
State/Other ID:	
H.Q. Address: PO Box 72 100 South Main St. Humboldt, SD 57035	Company Officer: Ritchy Griep
	Title: Mayor
	Phone Number: c/o (605) 363-3789
Fax Number:	
Web Site:	Email Address: c/o finance@humboldtsd.com
Employees Covered by OQ Plan:	3
Contractors Covered by OQ Plan:	3 companies
Total Mileage Represented:	12

Persons Interviewed	Title	Phone Number	Email Address
Kristie Ellis	Finance Officer	(605) 363-3789	finance@humboldtsd.com
Terry Hanson	OQ Contractor	(605) 770-1768	gts@santel.net

To add rows, press TAB with cursor in last cell.

OPS/State Representatives	Region/State
Mary Zanter	South Dakota

To add rows, press TAB with cursor in last cell.

Remarks:

Mileage Covered by OQ Plan (by Company and State)

List each company and subsidiary separately, broken down by state (using 2-letter designation). If a company has intrastate and/or interstate mileage in several states, use one row per state. If there are both gas and liquid lines, use both the first and second table. For small gas operators (e.g. master meter, LP), use the third table.

Jurisdictional to Part 192 (Gas) Mileage

Company (Gas Operator)	Operator ID	State	Interstate Gathering	IntraState Gathering	Interstate Transmission	IntraState Transmission	Interstate Distribution*	IntraState Distribution*	Remarks
Humboldt Municipal Gas	30964	SD						12	

(To add rows, press TAB with cursor in last cell.)

Jurisdictional to Part 195 (Hazardous Liquid) Mileage

Company (Liquid Operator)	Operator ID	State	Interstate Transmission	IntraState Transmission	Remarks

(To add rows, press TAB with cursor in last cell.)

Jurisdictional to Part 192 (Gas) Mileage - Small Operators

Company (Small Gas Operator)	Operator ID	State	Small Gas (e.g., master meter)*	LP*	Remarks

(To add rows, press TAB with cursor in last cell.)

1. Supply company name and Operator ID, if not the master operator from the first page (i.e., for subsidiary companies).
2. Use OPS-assigned Operator ID. Where not applicable, leave blank or enter n/a.
3. Use only 2-letter state codes in column #3, e.g., TX for Texas.
4. Enter number of applicable miles in all other columns. (Only positive values. No need to enter 0 or n/a.)
5. * Please do not include Service Line footage. This should only be MAINS.

1 - Document Program Plan, Implementing Procedures and Qualification Criteria

1.01 Application and Customization of "Off-the-Shelf" Programs

Does the operator's plan identify covered tasks and does it specify task-specific reevaluation intervals for individuals performing covered tasks? (Associated Protocols: 1.05, 2.01, 5.02)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Covered task list identifies operator qualified vs. contractor qualified and includes the re-evaluation period.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

1.02 Contractor Qualification

Does the operator employ contractor organizations to provide individuals to perform covered tasks? If so, what are the methods used to qualify these individuals and how does the operator ensure that contractor individuals are qualified in accordance with the operator's OQ program plan?

* Verify that the operator's written program includes provisions that require all contractor and subcontractor individuals be evaluated and qualified prior to performing covered tasks, unless the covered task is performed by a non-qualified individual under the direction and observation of a qualified individual. (Associated Protocols: 1.05, 2.02, 3.02)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: April 15 th all OQ information needs to be submitted. Reviewed by Terry Hanson and documented each year.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

1.03 Management of Other Entities Performing Covered Tasks

Has the operator's OQ program included provisions that require individuals from any other entity performing covered task(s) on behalf of the operator (e.g., through mutual assistance agreements) be evaluated and qualified prior to task performance?

* Verify that other entities that perform covered task(s) on behalf of the operator are addressed under the operator's OQ program and that individuals from such other entities performing covered tasks on behalf of the operator are evaluated and qualified consistent with the operator's program requirements. (Associated Protocols: 1.05, 2.02)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: No mutual assistance agreements.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

1.04 Training Requirements (Initial Qualification, Remedial if Initial Failure, and Reevaluation)

Does the operator's OQ program plan contain policy and criteria for the use of training in initial qualification of individuals performing covered tasks, and are criteria in existence for re-training and reevaluation of individuals if qualifications are questioned? (Associated Protocols: 5.02)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: MEA PEFs and KNTs are used. Training class/review held prior testing. 4.3, pg 10 re-evaluation intervals 6.1 & 6.2 pg 16 has for cause and incident or accident scenarios.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

1.05 Written Qualification Program

Did the operator meet the OQ Rule requirements for establishing a written operator qualification program and completing qualification of individuals performing covered tasks?

* Verify that the operator's written qualification program was established by April 27, 2001.

* Verify that the written qualification program identified all covered tasks for the operator's operations and maintenance functions being conducted as of October 28, 2002.

* Verify that the written qualification program established an evaluation method(s) to be used in the initial qualification of individuals performing covered tasks as of October 28, 2002.

* Verify that all individuals performing covered tasks as of October 28, 2002, and not otherwise directed or observed by a qualified individual were qualified in accordance with the operator's written qualification program. (Associated Protocols: 3.01, 7.01)

<input type="checkbox"/> No Issues Identified	Inspection Notes: Past 2001
<input type="checkbox"/> Potential Issues Identified (explain)	
<input checked="" type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

2 - Identify Covered Tasks and Related Evaluation Methods

2.01 Development of Covered Task List

How did the operator develop its covered task list?

- * Verify that the operator applied the four-part test to determine whether 49 CFR Part 192 or 49 CFR Part 195 O&M activities applicable to the operator are covered tasks.
- * Verify that the operator has identified and documented all applicable covered tasks. (Associated Protocols: 3.01)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Started with MEA and modified yearly for operator. Section 2.1.1 Program Review.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

2.02 Evaluation Method(s) (Demonstration of Knowledge, Skill and Ability) and Relationship to Covered Tasks

Has the operator established and documented the evaluation method(s) appropriate to each covered task?

- * Verify what evaluation method(s) has been established and documented for each covered task.
- * Verify that the operator's evaluation program ensures that individuals can perform assigned covered tasks.
- * Verify that the evaluation method is not limited to observation of on-the-job performance, except with respect to tasks for which OPS has determined that such observation is the best method of examining or testing qualifications. The results of any such observations shall be documented in writing. (Associated Protocols: 3.01, 3.02)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Included on covered task list. KNT passing 80%, PEF passing at 100%
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

2.03 Planning for Mergers and Acquisitions (Due Diligence re: Acquiring Qualified Individuals)

Does the operator have a process for managing qualifications of individuals performing covered tasks during program integration following a merger or acquisition (applicable only to operators engaged in merger and acquisition activities)?

- * Verify that the OQ program describes the process for ensuring OQ qualifications, evaluations, and performance of covered tasks during the merger with or acquisition of other entities. (Associated Protocols 3.01 3.02)

<input type="checkbox"/> No Issues Identified	Inspection Notes: Does not apply to municipalities.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input checked="" type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

3 - Identify Individuals Performing Covered Tasks

3.01 Development/Documentation of Areas of Qualification for Individuals Performing Covered Tasks

Does the operator's program document the evaluation and qualifications of individuals performing covered tasks, and can the qualification of individuals performing covered tasks be verified?

- * Verify that the operator's qualification program has documented the evaluation of individuals performing covered tasks.
- * Verify that the operator's qualification program has documented the qualifications of individuals performing covered tasks. (Associated Protocols: 4.02, 7.01)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Section 2.2 general employee responsibilities Section 3.0 identification of covered tasks Section 4.1 methods for assuring qualification of persons performing covered tasks. Latest MEA KNT testing not printed out, corrected during audit.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

3.02 Covered Task Performed by Non-Qualified Individual

Has the operator established provisions to allow non-qualified individuals to perform covered tasks while being directed and observed by a qualified individual, and are there restrictions and limitations placed on such activities?

- * Verify that the operator's program includes provisions for the performance of a covered task by a non-qualified individual under the direction and observation by a qualified individual. (Associated Protocols: 2.01, 2.02)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Section 2.2 General Employee Responsibilities. Span of control identified on covered task list.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

4 - Evaluate and Qualify Individuals Performing Covered Tasks

4.01 Role of and Approach to "Work Performance History Review"

Does the operator use work performance history review as the sole method of qualification for individuals performing covered tasks prior to October 26, 1999, and does the operator's program specify that work performance history review will not be used as the sole method of evaluation for qualification after October 28, 2002?

- * Verify that after October 28, 2002, work performance history is not used as a sole evaluation method.
- * Verify that individuals beginning work on covered tasks after October 26, 1999 have not been qualified using work performance history review as the sole method of evaluation. (Associated Protocols: 2.02)

<input type="checkbox"/> No Issues Identified	Inspection Notes: Past 1999
<input type="checkbox"/> Potential Issues Identified (explain)	
<input checked="" type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

4.02 Evaluation of Individual's Capability to Recognize and React to AOCs

Are all qualified individuals able to recognize and react to AOCs? Has the operator evaluated and qualified individuals for their capability to recognize and react to AOCs? Are the AOCs identified as those that the individual may reasonably anticipate and appropriately react to during the performance of the covered task? Has the operator established provisions for communicating AOCs for the purpose of qualifying individuals?

- * Verify that individuals performing covered tasks have been qualified in recognizing and reacting to AOCs they may encounter in performing such tasks. (Associated Protocols 3.01)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Included in the PEFs and KNTs. Training occurs prior to requalification to update/review AOCs.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

5 - Continued/Periodic Evaluation of Individuals Performing Covered Tasks

5.01 Personnel Performance Monitoring

Does the operator's program include provisions to evaluate an individual if the operator has reason to believe the individual is no longer qualified to perform a covered task based on: covered task performance by an individual contributed to an incident or accident; other factors affecting the performance of covered tasks?

* Verify that the operator's program ensures re-evaluation of individuals whose performance of a covered task may have contributed to an incident or accident.

* Verify that the operator has established provisions for determining whether an individual is no longer qualified to perform a covered task, and requires reevaluation.

(Specific Protocols: 2.02)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Re-evaluation covered in 6.0
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

5.02 Reevaluation Interval and Methodology for Determining the Interval

Has the operator established and justified requirements for reevaluation of individuals performing covered tasks?

* Verify that the operator has established intervals for reevaluating individuals performing covered tasks. (Associated Protocols: None)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Section 4.3 Evaluation Intervals.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

6 - Monitor Program Performance; Seek Improvement Opportunities

6.01 Program Performance and Improvement

Does the operator have provisions to evaluate performance of its OQ program and implement improvements to enhance the effectiveness of its program?

(Associated Protocols: None)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Section 6.3, page 17 and Section 2.1.1, page 6.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

7 - Maintain Program Records

7.01 Qualification "Trail" (i.e., covered task; individual performing; evaluation method(s); continuing performance evaluation; reevaluation interval; reevaluation records)

Does the operator maintain records in accordance with the requirements of 49 CFR 192, subpart N, and 49 CFR 195, subpart G, for all individuals performing covered tasks, including contractor individuals?

- * Verify that qualification records for all individuals performing covered tasks include the information identified in the regulations.
- * Verify that the operator's program ensures the retention of records of prior qualification and records of individuals no longer performing covered tasks for at least five years.
- * Verify that the operator's program ensures the availability of qualification records of individuals (employees, contractors and third party entities) currently performing covered tasks, or who have previously performed covered tasks. (Associated Protocols: 1.05, 3.01)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Section 5.1 & 5.2
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

8 - Manage Change

8.01 Management of Changes (to Procedures, Tools, Standards, etc.)

Does the operator's OQ program identify how changes to procedures, tools standards and other elements used by individuals in performing covered tasks are communicated to the individuals, including contractor individuals, and how these changes are implemented in the evaluation method(s)?

- * Verify that the operator's program identifies changes that affect covered tasks and how those changes are communicated, when appropriate, to affected individuals.
- * Verify that the operator's program identifies and incorporates changes that affect covered tasks.
- * Verify that the operator's program includes provisions for the communication of changes (e.g., who, what, when, where, why) in the qualification program to the affected individuals.
- * Verify that the operator incorporates changes into initial and subsequent evaluations.
- * Verify that contractors supplying individuals to perform covered tasks for the operator are notified of changes that affect task performance and thereby the qualification of these individuals. (Associated Protocols 1.04)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Section 6.3
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

8.02 Notification of Significant Program Changes

Does the operator have a process for identifying significant OQ written program changes and notifying the appropriate regulatory agency of these changes once the program has been reviewed?

- * Verify that the operator's written program contains provisions to notify OPS or the appropriate regulatory agency of significant modifications to a program that has been reviewed for compliance. (Associated Protocols: None)

<input checked="" type="checkbox"/> No Issues Identified	Inspection Notes: Section 2.1 item 1.
<input type="checkbox"/> Potential Issues Identified (explain)	
<input type="checkbox"/> N/A (explain)	
<input type="checkbox"/> Not Inspected	
Check exactly one box above.	

1. Wholesale changes made to an OQ Plan or Program, whether due to an overall effort to improve program performance, or due to a merger or acquisition that results in incorporating the best features of the competing plans and programs.
2. Recommend the operator send a letter to accompany the program that addresses the changes made to the program. The official notification should be addressed to headquarters.

9 – Field Inspection Findings

Additional Inspection Notes

- O&M plan is very general. Procedures are only in the OQ procedures.